

POSITION		ID NO.	DATE
CLASSIFIER		45	7-19-95
EXAMINER		502	8-9-95
TYPIST		343	8/10/95
VERIFIER		271	8-11
CORPS CORR.			
SPEC. HAND			
FILE MAINT.			
DRAFTING			

# INDEX OF CLAIMS

Claim		Date			
Final	Original				
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Best Available Copy

SYMBOLS  
✓ ..... Rejected  
+ ..... Allowed  
- (Through numeral) Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim		Date			
Final	Original				
	51				
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# INDEX OF CLAIMS

Best Available Copy

✓ ..... Rejected  
 = ..... Allowed  
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N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim		Date	
Final	Original	2	12
		13	1
		03	03
181	=	=	
182			
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(198)			
199	=	=	
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201	=	=	
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(223)			
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227			
228	=	=	
229			
230			

Claim		Date	
Final	Original	2	12
		13	1
		03	03
231	=	=	
232	=	=	
233	=	=	
234			
235	=	=	
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252	=	=	
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255	=	=	
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(266)			
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272	=	=	
273			
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275	=	=	
276	=	=	
277	=	=	
278			
279	=	=	
280	=	=	

Claim		Date	
Final	Original	2	12
		13	1
		03	03
281	=	=	
282			
283			
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(291)			
292			
293	=	=	
294			
295	=	=	
296			
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298			
299			
300	=	=	
(301)	✓	✓	
302	✓	✓	
303	✓	✓	
304	✓	0	
305	✓	✓	
306	✓	✓	
307	✓	✓	
308	✓	✓	
(309)	✓	=	
310	✓	=	
311			
312			
313	✓	=	
314	✓	=	
315	✓	=	
316	✓		
317	✓		
318	✓	=	
319	✓	=	
(320)	✓	=	
321			
322			
323	✓	=	
324	✓		
325	✓		
326	✓		
327	✓		
328	✓		
329	✓	=	
(330)	✓	✓	

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Final	Claim	Date	Final	Claim	Date	Final	Claim	Date
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148	148	8/16/16	148					